

**DEPARTMENT OF VETERANS SERVICE
STATE APPROVING AGENCY
Floyd Veterans Memorial Bldg., Suite E-970
Atlanta, Georgia 30334**

**APPLICATION FOR UPDATE OF APPROVAL FOR VA BENEFITS
UNDER SECTION 3675 & 3676, TITLE 38, US CODE**

I. NAME AND ADDRESS OF SCHOOL: _____

If classes are taught at locations in addition to above, list new and/or deleted location below:

LOCATION	PROGRAM NAMES	DATES 1 ST OFFERED	PROGRAM DESCRIPTIONS*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**II. CURRENT CATALOG AND HANDBOOK IDENTIFIED BY YEAR(S) COVERED, VOLUME AND
NUMBER:**

(Provide two certified copies of catalogs, handbooks, etc., marked "I CERTIFY THIS COPY TO BE TRUE AND CORRECT AS TO
CONTENT AND POLICY".)

III. NAME OF ACCREDITING AGENCY RECOGNIZED BY US DEPARTMENT OF EDUCATION: _____

IV. LEVEL OF ACCREDITATION: ☐ College, Ph.D. ☐ College, Masters ☐ College, Undergraduate
☐ Business School ☐ Vocational ☐ High School ☐ Other

V. APPROVAL/REAPPROVAL OF PROGRAMS:

ARE THERE CHANGES TO YOUR PREVIOUSLY APPROVED PROGRAMS? ☐ NO ☐ YES, IF YES, COMPLETE
PARAGRAPH VI FOR NEW PROGRAMS AND/OR PARAGRAPH VII FOR
PROGRAMS NO LONGER OFFERED.

VI. NEW PROGRAM NAME(S)	DATE FIRST OFFERED	HOURS* THEORY/SHOP/TOTAL	DESCRIPTION CATALOG PAGE**
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____

*Complete CLOCK (contact) HOURS if your institution is a Non College Degree (NCD) institution. GA Technical and Adult
Education facilities should sight State Standard numbers in lieu of specific clock hours when they apply.

**Attach a program curriculum and course descriptions if not in the catalog.

VII. PROGRAMS NO LONGER OFFERED	DATE LAST OFFERED	CAN STUDENT COMPLETE
_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO

(over)

**VIII. REMEDIAL/DEVELOPMENTAL
COURSES [NUMBER & NAME]**

DESCRIPTION
CATALOG PAGE*

*Attach a course description if not in the catalog.

IX. PROGRAMS OFFERED JOINTLY WITH OTHER SCHOOLS. [] NONE [] LISTED BELOW:

NAME OF
SCHOOL

PROGRAM DISCRIPTION
CATALOG PAGE*

*Attach a program description if not in the catalog.

X. PRACTICAL TRAINING (i.e., internship, practicum, occupational based instruction (CFR 21.4265))

Check the appropriate response.

[] Practical Training courses will not be certified to the VA.

[] Practical Training courses are offered and will be certified to VA - VSO Form 70-1 is attached.

XI. INDEPENDENT STUDY (i.e., directed study (CFR 21.4267)). **Cannot be certified for non-college degree programs.** Check the appropriate response.

[] Independent Study courses will not be certified to the VA.

[] Independent Study courses are offered and will be certified to VA - VSO Form 70-2 is attached.

XII.COOPERATIVE TRAINING (i.e., alternating phases of school and on-the-job training when school grants credit for on-the-job portion (CFR 21.4233(a)). Check the appropriate response.

[] Cooperative Training will not be certified to the VA.

[] Cooperative Training is offered and it will be certified to the VA - VSO Form 70-3 is attached.

XIII. OPEN CIRCUIT TELECAST COURSES (i.e., presented primarily to the public on commercial or public television (CFR 21.4233(c)(1)). Check the appropriate response.

[] Open Circuit courses will not be certified to the VA.

[] Open Circuit courses are offered and will be certified to VA - VSO Form 70-4 is attached.

XIV. OTHER CHANGES TO PREVIOUS APPROVAL:

YES NO EFFECT.

DATE

Catalog page*

(A) STANDARDS OF PROGRESS AND/OR GRADING SYSTEM [] [] _____

(B) ADMISSION REQUIREMENTS: [] [] _____

*If change is not in catalog, attach an addendum to the current catalog.

THIS VSO FORM 70 IS NOT COMPLETE WITHOUT THE ATTACHMENT OF A VSO FORM 70-5, "STATEMENT OF SCHOOL OFFICIAL" AND APPROPRIATE VSO FORM'S 70-1, 70-2, 70-3, AND/OR 70-4 (see paragraphs X. thru XIII above).

Signature of Certifying Official

Name and Title of Certifying Official

Date